

Occupational Safety Program

Aerial Lift Safety Program

Form

Aerial Platform Equipment Familiarization Form

Employee Name (Print)		TU ID #	
On this day, (insert date)	, I received instruction for	r the following equipment:	
Manufacturer	Model #	Serial #	
nstructions were provided by: (Nam	e of trainer)		
${f f}$ (Affiliation of trainer)		_ on the following information:	
) The location of the weather res	·	ing the operator's manual.	
) The purpose and function of all			
) Safety devices and operating ch	•	•	
An explanation of all decals, wa	• •	•	
) Determination that the purpose	•		
scope of the intended applicati An explanation on the contents	•		
safety rules.	on the manufacturer's opera	ating instructions and user s	
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This information is collected for documentation purposes only. Failure to provide this data may result in the improper identification of the individual participating in the activity. This information may be inspected, amended, or corrected by contacting the Department of Environmental Health & Safety. This information is generally not available for public inspection. It will be shared only with other departments at Towson University, the University System of MD, the State of Maryland, the U.S. federal government, and with other entities permitted by law and/or as authorized by you.

Website: https://www.towson.edu/public-safety/environmental-health-safety/

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